AO 240 (Rev. 07/10) Application to Proceed in District Court Without Prepaying Fees or Costs (Short Form)

UNITED STATES DISTRICT COURT
for the SOUTHERN
DISTRICT OF NEW YORK

BRUD ROSSMANN	)
Plaintiff/Petitioner	)
v.	) Civil Action No.
BENJAMIN NETANYAHU	)
Defendant/Respondent	)
ET AL.	)

17 CV 7802

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
(Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated.* I am being held at: ___N/A___ .
If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are:

N/A

My gross pay or wages are: $ ___0___ , and my take-home pay or wages are: $ ___0___ per
(specify pay period) ___N/A___ .

3. *Other Income.* In the past 12 months, I have received income from the following sources *(check all that apply)*:

(a) Business, profession, or other self-employment	☐ Yes	☒ No
(b) Rent payments, interest, or dividends	☐ Yes	☒ No
(c) Pension, annuity, or life insurance payments	☐ Yes	☒ No
(d) Disability, or worker's compensation payments	☒ Yes	☐ No
(e) Gifts, or inheritances	☐ Yes	☒ No
(f) Any other sources	☐ Yes	☒ No

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

$320/MONTH MEDICAL DISABILITY

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4. Amount of money that I have in cash or in a checking or savings account: $ _____ *0* _____ .

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name *(describe the property and its approximate value)*:

$ 0

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses *(describe and provide the amount of the monthly expense)*:

~ $2,000; MEDICAL, TRANSPORTATION, CLOTHING, STUDENT LOAN PAYMENTS, ETC.

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

N/A

8. Any debts or financial obligations *(describe the amounts owed and to whom they are payable)*:

~ $40,000 STUDENT LOANS

Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: _____ 9-07-17 _____
10-4-17

_____
Applicant's signature

BRAD ROSSMANN
Printed name